

**NOL  
FILED**

Pro Se 7 (Rev. 12/16) Complaint for Employment Discrimination

## UNITED STATES DISTRICT COURT

for the

Eastern District of Virginia

ALEXANDRIA Division

2018 JUL -6 P 12:20

CLERK US DISTRICT COURT  
ALEXANDRIA, VIRGINIA

Ricky Nelson Sims

Case No.

1:18cv842-AJT-JFA  
(to be filled in by the Clerk's Office)

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

Jury Trial: (check one)



Yes



No

Sky Chefs, Inc.

~~GT Corporation System~~ YORK

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

## COMPLAINT FOR EMPLOYMENT DISCRIMINATION

## I. The Parties to This Complaint

## A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	Ricky Nelson Sims
Street Address	1217 Chase Heritage Circle, Apt# 204
City and County	Sterling, Loudoun, County
State and Zip Code	Virginia 20164
Telephone Number	301-204-3318
E-mail Address	ricksims0106@outlook.com

## B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

---

**Pro Se 7 (Rev. 12/16) Complaint for Employment Discrimination**

---

**Defendant No. 1**

Name Sky Chefs, Inc.

Job or Title *(if known)* ~~GT Corporation System~~ *owner*

Street Address 4701 Cox Road, Suite 285

City and County Glen Allen Henrico County

State and Zip Code Virginia 23060

Telephone Number

E-mail Address *(if known)***Defendant No. 2**

Name

Job or Title *(if known)*

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address *(if known)***Defendant No. 3**

Name

Job or Title *(if known)*

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address *(if known)***Defendant No. 4**

Name

Job or Title *(if known)*

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address *(if known)*

**C. Place of Employment**

The address at which I sought employment or was employed by the defendant(s) is

Name	LSG, Sky Chefs, Inc.
Street Address	45051 Compass Court
City and County	Dulles, Loudoun, County
State and Zip Code	Virginia 20166
Telephone Number	(571) 234-5120

**II. Basis for Jurisdiction**

This action is brought for discrimination in employment pursuant to (check all that apply):



Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race, color, gender, religion, national origin).

*(Note: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)*



Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 to 634.

*(Note: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.)*



Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 to 12117.

*(Note: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)*



Other federal law (specify the federal law):

Title VII of the Civil Rights Act of 1964. (Retaliation)



Relevant state law (specify, if known):



Relevant city or county law (specify, if known):

**III. Statement of Claim**

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

A. The discriminatory conduct of which I complain in this action includes *(check all that apply)*:

- ☐ Failure to hire me.
- ☒ Termination of my employment.
- ☐ Failure to promote me.
- ☐ Failure to accommodate my disability.
- ☒ Unequal terms and conditions of my employment.
- ☒ Retaliation.
- ☐ Other acts *(specify)*: \_\_\_\_\_

*(Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.)*

B. It is my best recollection that the alleged discriminatory acts occurred on date(s)  
November 05, 2015 Through January 03, 2017

---

C. I believe that defendant(s) *(check one)*:

- ☐ is/are still committing these acts against me.
- ☒ is/are not still committing these acts against me.

D. Defendant(s) discriminated against me based on my *(check all that apply and explain)*:

- ☒ race \_\_\_\_\_
- ☐ color \_\_\_\_\_
- ☐ gender/sex \_\_\_\_\_
- ☐ religion \_\_\_\_\_
- ☐ national origin \_\_\_\_\_
- ☒ age *(year of birth)* 1961 *(only when asserting a claim of age discrimination.)*
- ☐ disability or perceived disability *(specify disability)* \_\_\_\_\_
- 

E. The facts of my case are as follows. Attach additional pages if needed.

---

*(Note: As additional support for the facts of your claim, you may attach to this complaint a copy of your charge filed with the Equal Employment Opportunity Commission, or the charge filed with the relevant state or city human rights division.)*

#### IV. Exhaustion of Federal Administrative Remedies

- A. It is my best recollection that I filed a charge with the Equal Employment Opportunity Commission or my Equal Employment Opportunity counselor regarding the defendant's alleged discriminatory conduct on *(date)*

October 17, 2017

---

- B. The Equal Employment Opportunity Commission *(check one)*:

☐

has not issued a Notice of Right to Sue letter.

☒

issued a Notice of Right to Sue letter, which I received on *(date)* 04/07/2018.

*(Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.)*

- C. Only litigants alleging age discrimination must answer this question.

Since filing my charge of age discrimination with the Equal Employment Opportunity Commission regarding the defendant's alleged discriminatory conduct *(check one)*:

☐

60 days or more have elapsed.

☐

less than 60 days have elapsed.

#### V. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

Pro Se 7 (Rev. 12/16) Complaint for Employment Discrimination

---

- Defendant(s) be directed to Reinstate Plaintiff.
  - Money damages (list amounts) All back and front pay plus \$300,000.00 in compensatory damages.
  - Cost and fees involved in litigating this case.
  - Such other relief as may be appropriate.
- 

**VI. Certification and Closing**

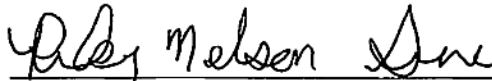
Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

**A. For Parties Without an Attorney**

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: JULY 06, 2018

Signature of Plaintiff



Printed Name of Plaintiff

RICKY NELSON SIMS

**B. For Attorneys**

Date of signing: \_\_\_\_\_

Signature of Attorney

\_\_\_\_\_

Printed Name of Attorney

\_\_\_\_\_

Bar Number

\_\_\_\_\_

Name of Law Firm

\_\_\_\_\_

Street Address

\_\_\_\_\_

State and Zip Code

\_\_\_\_\_

Telephone Number

\_\_\_\_\_

E-mail Address

\_\_\_\_\_

**IN THE UNITED STATES DISTRICT COURT  
FOR THE EASTERN DISTRICT OF VIRGINIA  
DIVISION**

Ricky Nelson Sims  
(Print your full name)

Plaintiff *pro se*,

v.

Sky Chefs, Inc.

ET Corporation System ~~RAA~~

(Print full name of each defendant; an  
employer is usually the defendant)

Defendant(s).

CIVIL ACTION FILE NO.

(to be assigned by Clerk)

**PRO SE EMPLOYMENT DISCRIMINATION COMPLAINT FORM**

**Claims and Jurisdiction**

1. This employment discrimination lawsuit is brought under (check only those that apply):

  X   Title VII of the Civil Rights Act of 1964, 42 U.S.C. §§ 2000e et seq., for employment discrimination on the basis of race, color, religion, sex, or national origin, or retaliation for exercising rights under this statute.

**NOTE:** To sue under Title VII, you generally must have received a notice of right-to-sue letter from the Equal Employment Opportunity Commission ("EEOC").



X  

Age Discrimination in Employment Act of 1967, 29 U.S.C. §§ 621 et seq., for employment discrimination against persons age 40 and over, or retaliation for exercising rights under this statute.

**NOTE:** To sue under the Age Discrimination in Employment Act, you generally must first file a charge of discrimination with the EEOC.

Americans With Disabilities Act of 1990, 42 U.S.C. §§ 12101 et seq., for employment discrimination on the basis of disability, or retaliation for exercising rights under this statute.

**NOTE:** To sue under the Americans With Disabilities Act, you generally must have received a notice of right-to-sue letter from the EEOC.

       Other (describe) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. This Court has subject matter jurisdiction over this case under the above-listed statutes and under 28 U.S.C. §§ 1331 and 1343.



**Parties**

3. Plaintiff. Print your full name and mailing address below:

Name Ricky Nelson Sims

Address 1217 Chase Heritage Circle, Apt# 204

Sterling, Virginia 20164

4. Defendant(s). Print below the name and address of each defendant listed on page 1 of this form:

Name Sky Chefs, Inc. ~~GT Corporation System~~ <sup>YWA</sup>

Address 4701 Cox Road, Suite 285

Glen Allen, Virginia 23060

Name

Address

Name

Address

**Location and Time**

5. If the alleged discriminatory conduct occurred at a location different from the address provided for defendant(s), state where that discrimination occurred:

LSG Sky Chefs

45051 Compass Court Dulles, Virginia 20166

6. When did the alleged discrimination occur? (State date or time period)

November 05, 2015 through January 03, 2017

---

---

---

---

**Administrative Procedures**

7. Did you file a charge of discrimination against defendant(s) with the EEOC or any other federal agency?   X   Yes        No

If you checked "Yes," attach a copy of the charge to this complaint.

8. Have you received a Notice of Right-to-Sue letter from the EEOC?

  X   Yes        No

If you checked "Yes," attach a copy of that letter to this complaint and state the date on which you received that letter:

April 07, 2018

9. If you are suing for **age discrimination**, check one of the following:

  X   60 days or more have elapsed since I filed my charge of age discrimination with the EEOC

       Less than 60 days have passed since I filed my charge of age discrimination with the EEOC

10. If you were employed by an agency of the State of Virginia or unsuccessfully sought employment with a State agency, did you file a complaint against defendant(s) with the Virginia Commission on Equal Opportunity?

☐ Yes      ☐ No      ☒ Not applicable, because I was not an employee of, or applicant with, a State agency.

If you checked "Yes," attach a copy of the complaint you filed with the Virginia Commission on Equal Opportunity and describe below what happened with it (i.e., the complaint was dismissed, there was a hearing before a special master, or there was an appeal to Superior Court):

---

---

---

---

11. If you were employed by a Federal agency or unsuccessfully sought employment with a Federal agency, did you complete the administrative process established by that agency for persons alleging denial of equal employment opportunity?

☐ Yes      ☐ No      ☒ Not applicable, because I was not an employee of, or applicant with, a Federal agency.

If you checked "Yes," describe below what happened in that administrative process:

---

---

---

---

**Nature of the Case**

12. The conduct complained about in this lawsuit involves (check only those that apply):

☐ failure to hire me  
☐ failure to promote me  
☐ demotion  
☐ reduction in my wages  
☒ working under terms and conditions of employment that differed from similarly situated employees  
☐ harassment  
☒ retaliation  
☒ termination of my employment  
☐ failure to accommodate my disability  
☐ other (please specify) \_\_\_\_\_

13. I believe that I was discriminated against because of (check only those that apply):

☒ my race or color, which is African-American  
☐ my religion, which is \_\_\_\_\_  
☐ my sex (gender), which is ☐ male ☐ female  
☐ my national origin, which is \_\_\_\_\_  
☒ my age (my date of birth is January 06, 1961)  
☐ my disability or perceived disability, which is: \_\_\_\_\_

☒ my opposition to a practice of my employer that I believe violated the federal anti-discrimination laws or my participation in an EEOC investigation

☐ other (please specify) \_\_\_\_\_

14. Write below, as clearly as possible, the essential facts of your claim(s). Describe specifically the conduct that you believe was discriminatory or retaliatory and how each defendant was involved. Include any facts which show that the actions you are complaining about were discriminatory or retaliatory. Take time to organize your statements; you may use numbered paragraphs if you find that helpful. Do not make legal arguments or cite cases or statutes.

SEE ATTACHMENT

(Attach no more than five additional sheets if necessary; type or write legibly only on one side of a page.)

15. Plaintiff       X       still works for defendant(s)  
      X       no longer works for defendant(s) or was not hired

16. If this is a disability-related claim, did defendant(s) deny a request for reasonable accommodation?        Yes        No       X       NA

If you checked "Yes," please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

17. If your case goes to trial, it will be heard by a judge unless you elect a jury trial. Do you request a jury trial?       X       Yes        No

**Request for Relief**

As relief from the allegations of discrimination and/or retaliation stated above, plaintiff prays that the Court grant the following relief (check any that apply):

- X       Defendant(s) be directed to Reinstate Plaintiff  
\_\_\_\_\_  
      X       Money damages (list amounts) All back and front pay plus \$300,000.00  
in compensatory damages.  
\_\_\_\_\_  
      X       Costs and fees involved in litigating this case  
      X       Such other relief as may be appropriate

**PLEASE READ BEFORE SIGNING THIS COMPLAINT**

Before you sign this Complaint and file it with the Clerk, please review Rule 11 of the Federal Rules of Civil Procedure for a full description of your obligation of good faith in filing this Complaint and any motion or pleading in this Court, as well as the sanctions that may be imposed by the Court when a litigant (whether plaintiff or defendant) violates the provisions of Rule 11. These sanctions may include an order directing you to pay part or all of the reasonable attorney's fees and other expenses incurred by the defendant(s). Finally, if the defendant(s) is the prevailing party in this lawsuit, costs (other than attorney's fees) may be imposed upon you under Federal Rule of Civil Procedure 54(d)(1).

Signed, this 6TH day of JULY, 2018

Ricky Nelson Sims  
(Signature of plaintiff *pro se*)

RICKY NELSON SIMS  
(Printed name of plaintiff *pro se*)

1217 Chase heritage Circle, Apt#204  
(street address)

Sterling, Virginia 20164  
(City, State, and zip code)

ricksims0106 @outlook.com  
(email address)

301-204-3318  
(telephone number)



UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF VIRGINIA  
\_\_\_\_\_ DIVISION

RICKY NELSON SIMS

Plaintiff(s),

v.

Civil Action Number: \_\_\_\_\_

SKY CORP., INC.

GT CORPORATION SYSTEM (RM)

Defendant(s).

LOCAL RULE 83.1(M) CERTIFICATION

I declare under penalty of perjury that:

No attorney has prepared, or assisted in the preparation of DISCRIMINATION COMPLAINT  
(Title of Document)

RICKY NELSON SIMS

Name of *Pro Se* Party (Print or Type)

Ricky Nelson Sims

Signature of *Pro Se* Party

Executed on: JULY 06, 2018 (Date)

OR

The following attorney(s) prepared or assisted me in preparation of \_\_\_\_\_  
(Title of Document)

\_\_\_\_\_  
(Name of Attorney)

\_\_\_\_\_  
(Address of Attorney)

\_\_\_\_\_  
(Telephone Number of Attorney)

Prepared, or assisted in the preparation of, this document

\_\_\_\_\_  
(Name of *Pro Se* Party (Print or Type)

\_\_\_\_\_  
Signature of *Pro Se* Party

Executed on: \_\_\_\_\_ (Date)